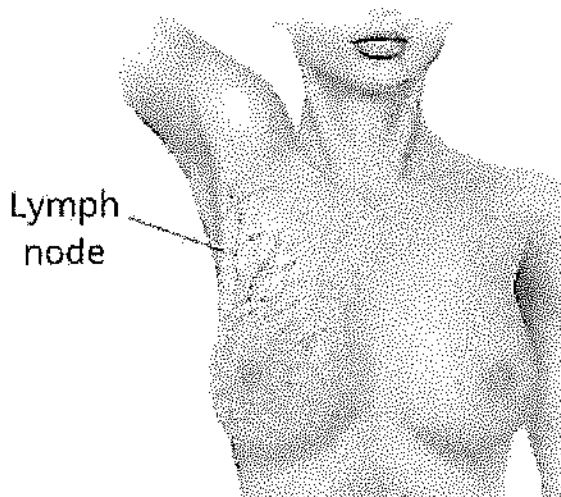


Total or Modified Radical Mastectomy



A total mastectomy and a modified radical mastectomy are surgeries that are done as part of treatment for breast cancer. You will have one of those types of surgery. Both types involve removing a breast.

- In a total mastectomy (*simple mastectomy*), all breast tissue including the nipple will be removed.
- In a modified radical mastectomy, lymph nodes under the arm will be removed along with the breast and nipple. Some of the lining over the muscle tissues under the breast may also be removed.

These procedures may also be used to help prevent breast cancer. A preventive (*prophylactic*) mastectomy may be done if you are at an increased risk of breast cancer due to harmful changes (*mutations*) in certain genes (*BRCA genes*). In that case, the procedure involves removing both of your breasts. This can reduce your risk of developing breast cancer in the future.

For a transgender person, a total mastectomy may be done as part of a surgical transition from female to male.

Let your health care provider know about:

- Any allergies you have.
- All medicines you are taking, including vitamins, herbs, eye drops, creams, and over-the-counter medicines.
- Any problems you or family members have had with anesthetic medicines.
- Any blood disorders you have.
- Any surgeries you have had.
- Any medical conditions you have.
- Whether you are pregnant or may be pregnant.

What are the risks?

Generally, this is a safe procedure. However, problems may occur, including:

- Pain.
- Infection.
- Bleeding.
- Allergic reactions to medicines.
- Scar tissue.
- Chest numbness on the side of the surgery.

- Fluid buildup under the skin flaps where your breast was removed (*seroma*).
- Sensation of throbbing or tingling.
- Stress or sadness from losing your breast.

If you have the lymph nodes under your arm removed, you may have arm swelling, weakness, or numbness on the same side of your body as your surgery.

What happens before the procedure?

Staying hydrated



Follow instructions from your health care provider about hydration, which may include:

- Up to 2 hours before the procedure – you may continue to drink clear liquids, such as water, clear fruit juice, black coffee, and plain tea.

Eating and drinking restrictions

Follow instructions from your health care provider about eating and drinking, which may include:

- 8 hours before the procedure – stop eating heavy meals or foods such as meat, fried foods, or fatty foods.
- 6 hours before the procedure – stop eating light meals or foods, such as toast or cereal.
- 6 hours before the procedure – stop drinking milk or drinks that contain milk.
- 2 hours before the procedure – stop drinking clear liquids.

Medicines

- Ask your health care provider about:
 - Changing or stopping your regular medicines. This is especially important if you are taking diabetes medicines or blood thinners.
 - Taking medicines such as aspirin and ibuprofen. These medicines can thin your blood. **Do not** take these medicines unless your health care provider tells you to take them.
 - Taking over-the-counter medicines, vitamins, herbs, and supplements.
- Your health care team may give you antibiotic medicine to help prevent infection.

General instructions

- You may be checked for extra fluid around your lymph nodes (*lymphedema*).
- Plan to have someone take you home from the hospital or clinic.
- Plan to have a responsible adult care for you for at least 24 hours after you leave the hospital or clinic. This is important.
- Ask your health care provider how your surgical site will be marked or identified.
- You may be asked to shower with a germ-killing soap.

What happens during the procedure?

- To lower your risk of infection:
 - Your health care team will wash or sanitize their hands.
 - Your skin will be washed with soap.
- An IV will be inserted into one of your veins.
- You will be given a medicine to make you fall asleep (*general anesthetic*).
- A wide incision will be made around your nipple. The skin and nipple inside the incision will be removed along with all breast tissue.
- If you are having a modified radical mastectomy:
 - The lining over your chest muscles will be removed.
 - The incision may be extended to reach the lymph nodes under your arm, or a second incision may be made.
 - Lymph nodes will be removed.
- Breast tissue and lymph nodes that are removed will be sent to the lab for testing.
- You may have a drainage tube inserted into your incision to collect fluid that builds up after surgery. This tube will be connected to a suction bulb on the outside of your body to remove the fluid.
- Your incision or incisions will be closed with stitches (*sutures*).
- A bandage (*dressing*) will be placed over your breast area. If lymph nodes were removed, a dressing will also be placed under your arm.

The procedure may vary among health care providers and hospitals.

What happens after the procedure?

- Your blood pressure, heart rate, breathing rate, and blood oxygen level will be monitored until the medicines you were given have worn off.
- You will be given pain medicine as needed.
- You will be encouraged to get up and walk as soon as you can.
- Your IV can be removed when you are able to eat and drink.
- You may have a drainage tube in place for 2–3 days to prevent a collection of blood (*hematoma*) from developing in the breast area. You will be given instructions about caring for the drain before you go home.
- A pressure bandage may be applied for 1–2 days to prevent bleeding or swelling. Ask your health care provider how to care for your pressure bandage at home.

Summary

- In a total mastectomy (*simple mastectomy*), all breast tissue including the nipple will be removed. In a modified radical mastectomy, the lymph nodes under the arm will be removed along with the breast and nipple.
- Before the procedure, follow instructions from your health care provider about eating and drinking, and ask about changing or stopping your regular medicines.
- You will be given a medicine to make you fall asleep (*general anesthetic*) during the procedure.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your healthcare provider.